COUNTY BOROUGH OF SOUTH SHIELDS.



ANNUAL REPORT OF THE SCHOOL MEDICAL OFFICER

FOR THE YEAR 1936.

W. CAMPBELL LYONS,

M.B., Ch.B., D.P.H.



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To the Chairman and Members of the Education Committee.

In presenting the annual report on the work of the School Medical Service for the year 1936, there are a few matters which appear to require comment.

A marked improvement has been found at routine medical inspections in the nutrition of the children. The number classified as of "excellent" and "normal" nutrition has increased while those classified as "slightly subnormal" and "bad" have been reduced and now comprise a very small percentage of those attending school. In an appreciable number of those whose nutrition is below normal, the condition is due to faulty assimilation.

The results of an enquiry addressed to the head teachers of every department in the schools, 54 in all, show that with the exception of three departments in which no improvement was observed and eight in which the improvement was only slight, there has been a general improvement in nutrition, particularly among those children who received free milk. This improvement is reflected in their physique, alertness, more sustained attention to lessons, reduction in lassitude or apathy, improved attendance, and in some cases evidence of increased intelligence.

From the result of the medical examination of children in their first year at school, it is found that 17 per cent. suffer from some defect which requires treatment. This percentage is unduly high and shows the necessity for the supervision of children between the age of one and five years.

A smaller number of children are found on dental inspection to require dental treatment and a larger number have availed themselves of the facilities offered, but still too many parents neglect to have their children's teeth treated when advised by the dentist. Much pain and subsequent ill-health would be obviated by early treatment.

There has been a decrease in the number of cases of tuberculosis among school children. While those reported as suffering from the pulmonary type of the disease have slightly increased, there has been a marked reduction in the number of those suffering from tuberculosis of other organs.

Again I place on record with pleasure my appreciation of the work of the staff of the School Medical Service.

W. CAMPBELL LYONS,
SCHOOL MEDICAL OFFICER.

Town Hall,
South Shields,
April, 1937.

School Medical Service.

Annual Report of the School Medical Officer. STAFF.

Principal School Medical Officer

and Medical Officer of Health —W. Campbell Lyons, M.B., Ch.B., D.P.H.

Assistant School Medical Officers—H. Levy, M.B., B.S.

Dorothy D. Nichol, M.B., B.S., B.Hy., D.P.H.

School Dental Surgeon

—F. Innes, L.D.S.

School Dental Surgeon

(part time)

—J. Loudon Reid, L.D.S.

Consultant Ophthalmologist

(part time)

—T. Gowans, M.B., Ch.B.

Ear, Nose and Throat Surgeon

(part time)

—W. J. Harrison, M.B., B.S., M.R.C.S., L.R.C.P.

Dr. Nichol commenced duties on 26th August, 1936, following the resignation of Dr. Hamilton which took effect on 31st August.

There are 10 Health Visitors whose combined duties include school medical service, tuberculosis and maternity and child welfare work, etc., and in addition there are two school nurses who devote all their time to the school medical service. The total time given to the school medical service is equivalent to that of five school nurses. There is also a female dental attendant.

CO-ORDINATION.

(a) There is complete co-ordination between the School Medical and Infant and Child Welfare Services. Both are under the same administration, and clinics for both services are held in the same building. All records are readily accessible and the clerical work is carried out by the staff of the Public Health Department.

As the school, tuberculosis and venereal diseases clinics are held in adjacent buildings, there is close co-operation between the School Medical Officers and the Tuberculosis Officer and V. D. Medical Officer; the advice of these officers is always sought and is readily available in suitable cases.

(b) There are no nursery schools in the Borough.

(c) Children under one year and to an increasing extent those between 1 and 5 years are supervised by the maternity and child welfare medical officer and health visitors, who also act as school nurses.

The following are the reports made to me by the Assistant School Medical Officers, the School Dentist and the Consultant Ophthalmologist. They include reports on the work of the School for Partially Sighted and the Open-Air School.

THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC ELEMENTARY SCHOOLS.

Number of children on the registers at the end of 1936	17,741
Average attendance for the year (92.4 per cent.)	16,906
Number of elementary schools (excluding the School for the Partially Sighted and the Open Air School)	24
Number of Elementary Departments	53
Number of children on registers of special schools at end of	007
1936	221
Average attendance at special schools (86.2 per cent.)	187

School Hygiene.

Some important changes were made during 1936. Stanhope Road Senior School for boys and girls was rebuilt with extensive alterations. The improvements include class-rooms with adequate floor space and modern desks, a central hall, ample lavatories and cloak-rooms, an additional playground on the roof and a well-equipped and spacious gymnasium. The lighting, ventilation and heating arrangements have been constructed on up-to-date lines.

Modern sanitary conveniences were installed at St. John's school.

The sanitary arrangements at the various schools were kept under observation throughout the year by the Assistant Medical Officers. They are, on the whole, satisfactory.

Owing to migration of families in consequence of the slum clearance programme, the present Simonside School is inadequate to accommodate the increased school population in this area. There is urgent need of additional class-rooms at this school.

Medical Inspection.

In the case of the public elementary schools there are three routine medical inspections carried out each year. The first inspection includes all the entrants, that is, those children between the ages 5—6 years; the second takes place after the pupils have attained the age of 8 years, and the third after attaining the age of 12 years. The head teachers inform parents as to the time and date of the inspection by the school medical officer, and parents are thus given the opportunity of learning of any defects in their children which require medical attention. The attendance of parents is to be encouraged, so that advice can be given to someone responsible and personally interested in the welfare of the child.

At the Open Air School and the School for the Partially Sighted all the children are examined at least once a year. In addition to this the Assistant School Medical Officer visits once a fortnight. The Authority's Consultant Ophthalmologist examines once a year at least those children attending the School for Partially Sighted Children.

The number of children examined at routine and special examinations during 1936 is given below:—

(1)	ROUTINE MEDICAL INSPECTIONS.	
	Number of children examined in 1936:	
	Entrants (5—6 years)	1,772
	Intermediates (8—9 years)	1,617
	Leavers (12—13 years)	1,902
	Total	5,291
(2)	OTHER INSPECTIONS.	
	Number of Special Inspections	5,898
	Number of Re-inspections	8,990
	Total	14 888

"Other Inspections" are inspections of children referred to the clinic by parents, school attendance officers, teachers, health visitors and others. Annual routine inspections at the special schools are included under special inspections.

During the year the number of special inspections has been considerably higher than in 1935.

The special surveys to investigate the nutritional condition the children are not included in the number of medical inspection given in the above table.

Findings of Medical Inspections.

NUTRITION.

Following the procedure of the two previous years the assistant school medical officers made special visits to the elementary schools to ascertain the number of under-nourished children. Two complete surveys were made, one in April and the second in November. Every child, apart from an occasional absentee, was examined. All pupils showing any evidence of sub-normal nutrition were recommended extra nourishment in the form of free milk. In certain cases free meals were advised in addition. The number recommended for extra nourishment shows a substantial increase on the number for the previous year.

This is in part due to the fact that only rarely are children taken off the free milk lists so that the number on the list increases after each survey.

Practically every child shows improvement, after having had the daily ration of milk. The medical officers, however, feel disinclined to advise its discontinuance so long as necessitous circumstances persist in the child's home.

There is little doubt that the pupil would soon revert to his previous subnormal condition were he deprived of the extra supply of milk.

The details for the two surveys are as follows:—

	1st	2nd
	Survey.	Survey.
Approximate number of children examined	17,000	16,350
Number recommended extra nourishment	1,312	1,930
Percentage recommended	7.7	11.7
Number supplied with free milk on income	,	
basis	675	1,048
Number who did not take advantage of the		
offer	465	619

Uncleanliness.

Two complete surveys were carried out by the school nurses. At the first survey 12 per cent. of the 18,044 children inspected were found to be unclean. The percentage found unclean at the second survey was 10.7. This represents 4,008 children unclean out of 35,133 examined or approximately one in nine. For 1935 the proportion was one in fifteen.

While this large increase is rather startling it should be mentioned that this year's examinations were carried out by newly appointed nurses who were very careful to include every case of uncleanliness, even of a minor character.

In all, 40,299 examinations were made of the 35,133 children inspected by the school nurses. An analysis of the surveys showed that at the boys' departments four schools had less than 0.5 per cent. uncleanliness, the worst having a percentage of 9.4. Among the girls' schools the best return was 5.4 per cent. while the two worst had figures of uncleanliness of 38.5 per cent. and 42.3 per cent.

The following figures give the results of both surveys:—

RIBST	SURVEY.
	LYUDAYDII.

		Verminous	Percentage
Departments.	Examined.	or dirty.	unclean.
Boys	5,132	154	3.0
Girls		710	16.0
Juniors and Infants	8,479	1,305	15.4
Total	18,044	2,169	12.0

SECOND SURVEY.

		Verminous	Percentage
Departments.	Examined.	or dirty.	unclean.
Boys	5,345	206	3.9
Girls	4,718	717	15.2
Juniors and Infants	7,026	916	13.0
Total	17,089	1,839	10.7

MINOR AILMENTS.

These include such conditions as lacerations, skin infections, minor injuries, chilblains, and inflammatory and non-inflammatory conditions of the external eye.

SKIN DISEASES.

The skin conditions most frequently seen and treated at the school clinic are impetigo, seborrhoea, eczema, urticaria, scabies, ringworm and septic sore.

VISUAL DEFECTS.

Following routine or special inspections 910 cases of defective vision and 74 cases of squint were referred for further examination.

EXTERNAL EYE DISEASES.

There was an increase in the incidence of conjunctivitis during the year. These cases numbered 131, this being 17 more than in 1935. Other eye cases treated were such conditions as blepharitis, corneal ulcers, episcleritis, meibomian cysts, and hordeolum.

NOSE AND THROAT DEFECTS.

At routine inspections the number of children found with nose and throat defects requiring treatment was 8.7 per cent., of the children examined, as compared with 9.4 per cent. in 1935, and 10.6 per cent. in 1934.

The number found at routine and special inspections was as follows:—

Chronic tonsillitis only	1,069
Adenoids only	81
Chronic tonsillitis and adenoids	513
Other conditions	64

Of the total, 909 were referred for treatment, and 818 for further observation.

Operative treatment is suggested where there is definite obstruction to breathing, in cases of recurrent tonsillitis which is doing or is likely to do harm to the child, certain cases of deafness, and obviously diseased tonsils which act as a chronic septic focus. Where necessary the children have dental treatment before tonsillectomy is carried out.

The arrangements for treatment are satisfactory. Operations are carried out at Harton Hospital. The children are admitted to hospital on the night prior to operation, being examined on admission to ascertain their fitness for the operation. All normal cases are discharged two days later. Health Visitors afterwards visit the homes of the children, thus securing an effective scheme of "following up" of all cases. Finally, all cases treated are reexamined on the eighth day after operation at the school clinic.

In a few exceptional cases removal of the tonsils is done by dissection, and not by the usual routine method of the guillotine.

EAR DISEASE AND DEFECTIVE HEARING.

In 1936 there were 270 children found to have defective hearing, this being 55 less than in 1935. Those suffering from otitis media numbered 254, and those with other ear diseases 27.

DENTAL DEFECTS.

The number of dental defects was again less than in previous years. Of 5,291 children examined, 2,447 or 46 per cent. were suffering from defective teeth. The percentage in 1935 was 50.

ORTHOPAEDIC AND POSTURAL DEFECTS (other than Active Tuberculosis).

There are 29 crippled children of school age in the borough of whom one is at no school or institution, 3 are in residential schools for crippled children, and one is in an institution other than a school. The remainder are able to attend elementary schools.

The reduction is partly due to a decrease in the number of cases of non-pulmonary tuberculosis.

TUBERCULOSIS.

61 children were referred by the School Medical Officers for examination by the Tuberculosis Medical Officer during 1936, as compared with 54 in the previous year. Of these 23 were suffering from tuberculosis (pulmonary 8; non-pulmonary, 15).

The following table shows the incidence of tuberculosis among children of school age, as revealed by notifications received by the Medical Officer of Health, or otherwise ascertained:—

	19	35.	19	36.
Ago Chour	Pulmonary.		Pulmonary.	
Age-Group. 5—10 years	Boys. 2 4	Girls. 8 6	Boys. 8 6	Girls. 4 10
Total	20		28	
	Non-Pulmonary.		Non-Pulmonary.	
5—10 years	· ·	Girls. 17 14	Boys. 13 11	Girls.
Total	5	5	3	6

It will be seen from the above that although there is a slight increase in pulmonary tuberculosis there has been a substantial decrease in non-pulmonary tuberculosis.

Previous Infectious Diseases.

Of the children examined at routine inspections in 1936,

38.4 per cent. had previously had measles.

21.1	,,	,,	,,	whooping cough.
16.9	,,	,,	,,	chickenpox
5.0	,,	,,	,,	scarlet fever.
0.85	2.2	2.2	9.9	diphtheria.

VACCINATION.

41 per cent. of the children examined were found to be unvaccinated.

Following-up.

The Health Visitors paid 1,153 visits to the homes of school children for the purpose of ascertaining whether the necessary treatment was being obtained; 196 visits in connection with uncleanliness; 747 visits after surgical and dental treatment; 34 in connection with orthopaedic cases; 440 regarding mentally defective children; and 59 visits for other miscellaneous purposes in connection with the school medical service. In addition 242 visits were paid to the schools for similar purposes, and 163 visits for routine medical inspection apart from 577 visits to schools in connection with cleanliness surveys. This is in addition to the visits paid to the homes regarding tuberculosis, infant welfare and infectious diseases.

The health visitors attended 444 sessions at general school clinics, 160 sessions at dental clinics, and 73 sessions at eye refraction clinics, apart from the attendances at child welfare and tuberculosis clinics.

A female dental attendant also assists the dental surgeons at the dental clinic and occasionally at inspections at school.

Medical Treatment.

The number of children who attended the school clinic during the year was 5,823; of these 4,542 were treated. The total number of attendances was 17,962. The numbers are somewhat lower than those of 1935.

SKIN DISEASES.

The numbers of children who received treatment for skin conditions were as follows:—

Impetigo	535
Ringworm (scalp)	70
(body)	24
Scabies	51
Molluscum contagiosum	7
Others	1,082

There was an increase in the number of cases of skin disease. Difficulty is experienced in having scabies and impetigo efficiently treated at home, thus leading to considerable absence from school. Arrangements have been made in the new clinic for a cleansing station which will no doubt reduce the number of absentees from school on account of scabies.

EXTERNAL EYE DISEASES.

Angular conjunctivitis is the most common disease of the eyes amongst school children. Phlyctenular conjunctivitis and blepharitis are quite often seen, and a few cases of corneal ulcers are treated each year. The latter are usually seen in the early stages and rarely require hospital treatment.

VISION.

There were 625 cases submitted for refraction by the school medical officers this year. In 590 of the cases examined, spectacles were prescribed. The number supplied through the Education Authority's scheme was 557, of which 437 were supplied free and the remainder at cost price. The incidence of refractive errors found was:—

Hypermetropia	36.3	per cent.
Myopia	6.6	,,
Simple hypermetropic astigmatism	7.6	,,
Simple myopic astigmatism	2.1	,,
Compound hypermetropic astigmatism	34.3	,,
Compound myopic astigmatism	10.4	>>
Mixed astigmatism	2.7	22

In addition, two cases of squint were referred to Mr. Gowans for operation.

NOSE AND THROAT DEFECTS.

During 1936, 243 elementary school children received operative treatment at Harton Hospital, of whom 239 were cases of enlarged tonsils and adenoids. In addition, 42 children were treated by other surgeons; 34 for enlarged tonsils and adenoids, and 8 for enlarged tonsils only.

EAR DISEASE.

Middle ear disease with otorrhoea is very commonly seen in children. Where it is thought to be the result of disease of the tonsils, tonsillectomy is advised.

A few cases of external ear diseases, such as seborrhoea or persistent eczematous conditions, were also treated.

DENTAL DEFECTS.

The following is the report of the School Dental Surgeon, Mr. F. Innes, L.D.S.

"During 1936, routine dental inspections have been carried out at the various schools in the town as in previous years, including all elementary schools, the Central Schools, St. John's Commercial School, the Open Air School, and the school for the Partially Sighted.

14,602 children were examined at these inspections, and 8,956 were found to be in need of dental treatment (61.3 per cent.). Of this number, 3,831 were treated at the Clinic (42.8 per cent.). The total number of children treated, including the "special" cases, was 3,932 with a total of 5,419 attendances to complete the treatment.

The percentage of children treated shows a substantial improvement on previous years (33 per cent. in 1935 and 31 per cent. in 1934), and is partly due to the elimination from the inspection of the children whose parents have consistently refused consent to the necessary treatment. This also, in part, accounts for the fewer number of children inspected.

The method adopted has been to warn parents after two consecutive refusals that a third refusal would mean exclusion from future dental inspections.

These children are still seen by the school medical officers at the routine medical inspections; attention is called to the state of the teeth where necessary, and the parents are encouraged to have any dental defects remedied. The children can also be treated at the clinic on the initiative of the parents. Toothache is invariably the reason for treatment being sought.

There has been a noticeable improvement in the condition of the teeth in recent years, and, although the improvement is slow, it is encouraging to be able to report some progress. This improvement is reflected in the figures relating to permanent teeth with respect to the number of fillings and extractions during the past three years. The number of fillings has gradually increased, and the number of extractions has shown a corresponding decline. The actual figures are as follows:—

1934 .. 1,515 fillings .. 1,882 extractions. 1935 .. 1,618 ,, .. 1,823 ,, 1936 .. 1,678 ,, .. 1,717 ,,

It will be noticed that in the period from 1934 to 1936, the number of fillings has increased by 163, and the number of extractions has decreased by 165. This is a good sign, and I think future years will show a further improvement.

Propaganda has again been carried out in the schools by means of the leaflets issued by the Dental Board.

It is proposed, during 1937, to extend the scope of the routine dental inspections so as to include the children attending the Boys and Girls High Schools."

ORTHOPAEDIC AND POSTURAL DEFECTS.

During the year 38 children received treatment under the Education Authority's orthopaedic scheme at the Ingham Infirmary, 23 of these being new cases. The following is a description of those deformities referred to the hospital during 1936:—

- 4 children were disabled as a result of infantile paralysis.
- 2 were suffering from drop foot or talipes.
- 4 had deformities produced by rickets.
- 5 children had flat feet.
- 2 had spinal curvature.
 - 2 had wry neck or torticollis.
 - One child required surgical treatment for cleft palate.
 - One child with pes cavus or hollow foot
 - One child crippled in consequence of a rheumatic affection of the joints, and
 - One child whose sex was doubtful who required special investigation.

Five of the above were submitted to operation, and except for two, who declined any form of treatment, the others attended the out-patient department for massage and electric therapy. Two children in addition were provided with special appliances. Fifteen children referred in previous years also continued to attend the centre for treatment.

The total work carried out was as follows:—12 operations were performed, 336 in-patient days were spent by children in hospital, 1,102 attendances were made by the children at the out-patients' department, and 3 appliances were supplied.

Appliances were also supplied to 5 children who attended the Fleming Memorial Hospital, Newcastle-upon-Tyne.

Three children not attending any treatment centre had special boots renewed or repaired at the expense of this Authority. Two other crippled children also received attention at the Royal Victoria Infirmary, Newcastle-upon-Tyne. Three children made use of the ambulance which is provided for cripples attending hospitals outside the borough.

HEART DISEASE.

The majority of the children suffering from this affliction receive treatment in hospital or by private practitioners. Actually only 4 cases of organic heart disease received attention at the general clinic during the year. Known cases in attendance at schools are kept under special observation with regard to games and physical training.

ULTRA VIOLET RAY THERAPY.

Four children of school age were referred for artificial light therapy at Harton Hospital by the School Medical Officers during 1936, two for alopecia areata, one for rickets, and one for debility and chorea.

In addition, 15 children referred in previous years, continued their treatment, the 19 cases making a total of 757 attendances during the year.

OTHER DEFECTS.

The other defects which were treated are summarised below:—

Disease or Defect.	Under the Authority's Scheme.	Other-wise.	Total.
Lung disease (not tuberculous)	801	• •	801
Anaemia and debility	$\begin{array}{c} 678 \\ 9 \end{array}$		678
Enlarged glands	72	• •	72
Enteritis	32		32
Gastritis	6	• •	6
Rheumatism	141		141
Disease of nervous system	95	1	96
Other defects or diseases	236	12	248
Total	2,070	13	2,083

Treatment of Uncleanliness.

The work of the school nurses in this connection is summarised in Table 6, page, 39.

At present the discharge block at Deans Hospital is available for children who require cleansing on account of their verminous condition. No compulsory cleansing orders were issued during the year, but six notices were served on parents under Section 87 of the Education Act, 1921. The school nurses paid 196 visits to parents regarding the uncleanly state of their children at school. Several children with verminous heads were attended to at the general clinic.

Infectious Diseases.

Scarlet fever continued to be prevalent throughout the year, particularly in January and February. A total of 659 cases were notified at all ages. This is the highest number of cases reported in any one year since 1924, when 734 cases were notified. In 1934 when the disease first showed signs of increasing prevalence there were 496 cases, followed by 481 in 1935.

Diphtheria was slightly less in evidence than in the previous year, a total of 82 cases being notified in 1936. The maximum number in any one week was 6 in the first week in April, and a similar number in the third week in May. Many of the cases were afterwards found to be conditions other than diphtheria.

There was a definite increase in the incidence of measles from June to August, but generally the disease was not very prevalent.

A few cases of whooping cough were reported each week throughout the year but there was no marked incidence. The highest numbers occurred from February to April when the new cases reported from the schools averaged about 12 a week.

Mumps was fairly prevalent in the first 6 months of the year and especially so in January and May.

A large number of cases of chickenpox occurred between January and April with a recurrence of the outbreak at the beginning of July and towards the end of the year.

Colds and influenza were common causes of absence from school, but not to any serious extent. The maximum number of new cases in any one week was 268 in the third week in January and 248 in the fourth week of November.

No class or department was closed at any time during 1936 on account of infectious disease, and no certificates were issued by the school medical officer under the Board's attendance instructions

Physical Education.

The following Report has been submitted by Mr. Conrad A. Holmes, the Organiser of physical education to the South Shields Education Authority:—

"Since taking up duty in September, 1936, there has been noticeable improvement in the standard of performance of the daily physical training lesson throughout the Authority's schools. The teachers in charge of this subject have made definite efforts to gain a fuller understanding of the Board's Syllabus of Physical Training and in this respect, demonstration lessons by the Organiser followed by a course of lectures extending over the winter months followed up by regular routine visits to the schools, have done much to assist.

In all new schools provision has been made for the inclusion of gymnasia or large rooms designed for physical training lessons.

Among the children there is evidence of difficulty in the provision of suitable clothing (especially of light slippers) for the physical training lesson, but this problem is to be discussed by the Authority shortly.

The teachers show marked enthusiasm for, and appreciation of the physical training lessons and no doubt, as facilities and conditions improve, the standard of the lesson will improve correspondingly.

Swimming and organised games are well arranged and conducted, and have proved their value in the schools over a period of many years. The Authority makes full use of the Derby Street Baths, the number of children taught to swim is satisfactory, and the proportion of those children who pass the Royal Life Saving Society's examinations is very high.

Full use is made of the Authority's recreation ground at Cleadon Park, and the number of children using the shower baths provided thereon is increasing. Playing fields available on other grounds are also being used fully.

Public classes for adults are a necessity in the Borough. At present there are but a few, and these are restricted to members of existing clubs or associations. The Organiser expects to inaugurate 'Keep Fit' classes in the coming autumn, and a number of prospective instructors are being coached for this work.

The recent declarations by the Government and by the leading national authorities as to the desirability of physical education for all ages is giving the work a stimulus. It is to be hoped that in South Shields generally every effort will be made to offer the public some opportunity of participating in the campaign for health and bodily fitness.

The Organiser has been pleased to co-operate with the Medical Officers in connection with physical training lessons in the Partially Sighted and Open-Air Schools, and looks forward to the future development of this co-operation in all matters relating to physical education and health."

Provision of Meals.

As stated in my Annual Report for 1935, again many children specially selected as suitable for free meals by the school medical officers did not take advantage of the offer. There was a substantial decrease in the number of children supplied with free meals during the year. Durin 1936, the total number of meals supplied was 298,844 at a set of £5,603 6s. 6d., the number of children supplied at the eigh sentres being 1,682. In 1935, 2,277 children were supplied with 392,031 means, at a cost of £7,350 11s. 7d.

Provision of Milk.

As a result of routine and special inspections, 1,752 elementary school children were provided with free milk, at a cost of £342 16s. 0d., representing 6,856 gallons. In addition, 54 boys in attendance at the Junior Instruction Centre were also supplied, the extra cost being £7 16s. 0d.

School Baths.

At one elementary school bathing arrangements are provided and at the High School and Stanhope Senior School the scholars have the use of shower baths after games or physical training. During the year, school children made 59,721 attendances at the Derby Street Public Baths (boys 46,169 and girls 13,552) under the Education Authority's instructors.

The number of certificates gained during the year was as follows:—

Elementary Schools	1.507
Secondary Schools	167
Junior Instruction Centre	30

212 medallions and 324 intermediate certificates were awarded by the Royal Life Saving Society.

Co-operation of Parents.

Parents were present at 85 per cent. of the inspections at routine medical examinations. There were eleven objections to medical examination, all of which were from secondary schools.

Of the children examined at the school clinic during the year 31 per cent. were sent or brought by parents, and 66 per cent. were notified to attend by head teachers.

The following is a statement of the amounts contributed at the various clinics in accordance with the scale of charges approved by the Board of Education:—

Eye Clinic	18 45 112	s. 2 15 8 15	9 6 0
Total '	£187	2	2

In 1935 the total amount contributed was £162 15 1d.

Co-operation of Teachers and Attendance Officers.

It is a pleasure to again place on record the valuable help rendered by the head teachers and attendance officers. Their co-operation with the school medical service is much appreciated.

Co-operation of Voluntary Bodies.

SHOELESS CHILDREN'S FUND.—The Honorary Secretary, Chief Constable Wilson, informs me that 3,826 children were supplied with boots and stockings during 1936.

POOR CHILDREN'S HOLIDAY ASSOCIATION.—Through this organisation 13 children were given the benefit of a holiday in the country.

NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN.—The assistance rendered by the Inspector for the N.S.P.C.C., in the four cases referred to him is gratefully acknowledged.

BLIND, DEAF AND DEFECTIVE CHILDREN.

These exceptional children are referred to in table 3, the Board of Education's Form 8 c.M. (page 34).

MENTAL DEFICIENCY.

In 1936, 91 children were examined by the school medical officers from the point of view of mental deficiency, and were certified as follows:—

	Boys.	Girls.	Total.
Average mentality (delinquents)	3	• •	3
Dull or backward	32	25	57
Inconclusive (to be re-examined)	1		1
Feeble-minded:			
For day school	11*	13	24
Ineducable (to be notified to Local			
Control Authority)	3†	2	5
Imbecile		1	1
Idiot		• •	• •
Total	50	41	91

^{*}Includes one examined in a previous year who was formerly judged to be dull or backward.

[†]Includes a cretin.

One boy was re-examined by request of the parent, and was found to be still mentally defective. Two other children (one boy and one girl) were re-examined, and the certificates of feeble-mindedness were cancelled.

Another child re-examined was found to be still dull or backward.

The pupils at Prudhoe Residential School were re-examined and as a result five boys and one girl were notified to the Mental Deficiency Act Committee as incapable of receiving further benefit at the school; and three boys nearing the age of 16 and about to be discharged from the school were reported to the Committee as being suitable to be placed under supervision or guardianship or to be sent to an institution. The certificate of mental deficiency in another case, a girl, was cancelled, and another girl was recommended for discharge as having improved although she was still subnormal.

A child under 7 years of age, who had been given a trial at the special school with the approval of the Board of Education, was after further examination found to be ineducable and the name was notified informally to the Local Control Authority.

A number of boys were referred for examination by the Juvenile Court.

At the end of 1936 there were 123 ascertained educable feeble-minded children as under :—

	Boys.	Girls.	Total.
At certified residential schools for			
mentally defective children	14	5	19
At certified schools for blind children	1	• •	1
*At public elementary schools	45	33	78
At other institutions	2	6 6	2
At no school or institution	15	8	23

^{*}Includes five boys and two girls at the open air school.

The two boys at other institutions are attending the Juvenile Instruction Centre.

Of the 23 children at no school or institution, 11 boys over 14 years of age are working.

These feeble-minded children are kept under supervision by the health visitors who pay visits at least quarterly, apart from enquiries made for special purposes. A total of 440 such visits were paid by the health visitors acting as school nurses during the year.

As yet no local day school for mentally defective children has been provided, but the opening of such a school is now under consideration.

The increase in the number of mentally defective children from 68 in 1931 to 123 at the end of 1936 does not represent a real increase. Owing to frequent changes in the medical staff and the fact that certain of the assistant school medical officers had not been approved by the Board of Education as certifying officers, many potentially feeble-minded children remained uncertified. This handicap on the Local Education Authority's duty of ascertainment has been gradually overcome in recent years, and the number of known defectives in the Borough may now be considered to be approximately correct.

PARTIALLY SIGHTED CHILDREN.

There were 41 pupils in attendance at the special school for partially sighted children at the end of the year. They are classified according to their eye defect, as follows:—

Highly myopic	12
Cataract	8
Nystagmus	4
Opacities from corneal ulcer	6
Opacities from keratitis	3
Coloboma of iris and choroid	2
Optic atrophy	1
Degenerative change of the choroid	2
Ophthalmia neonatorum	2
Plastic oveitis	1

All these children were re-examined during November, by the Consultant Ophthalmologist, Mr. T. Gowans, who reported on each child individually. The following is his general report:—

"I am very pleased to again be able to report a year of uninterrupted progress in the condition of the pupils at the Myope School. The majority of the cases show a definite improvement and there is no case of any deterioration. I would again like to compliment Dr. Levy on his work with reference to the school and the skill he has shown in dealing with complicated errors of refraction.

Besides the improvement in the vision of the majority of the pupils I was much impressed by the improvements in their physique."

SPEECH TRAINING CLASS.

Full particulars of this class were given in last year's report. It is now possible to convey some idea of the progress made since its commencement in September, 1935, until the end of 1936. During the period six courses of eight weeks each, and two refresher courses, were arranged, ten children attending at each class.

49 children, 43 boys and 6 girls, were given the advantage of the special education. Six of these, however, required additional courses owing to some recurrence of their disability. The refresher courses were given especially for those older children who were shortly leaving school.

On admission the condition of the speech of the 49 children was as follows:—

Stammering slight	8
Stammering considerable	7
Stammering severe	10
Stammering very severe	24

As a result of treatment, 41 children were discharged as "apparently cured," although two boys required additional courses, four were passed as satisfactory after taking a refresher course, two still exhibited some hesitation in speech and are awaiting a refresher course, one boy whose defect was extremely severe had three additional courses. He had greatly improved but could not be regarded as cured. One boy, an epileptic, was found to be unsuitable and discharged after $2\frac{1}{2}$ weeks.

Fifteen of the above children have now left school, the majority having found employment. Letters and reports received are very gratifying and indicate gratitude for the benefit of the course.

The Saturday morning weekly refresher courses were fairly well attended with an average of 17 to 20 children. At these sessions the instructress gives advice and aid in maintaining control of speech.

At the end of each ordinary course head teachers, teachers and parents, are invited to "observation afternoons" to hear the pupils speak, read, recite, say tongue twisters, ask and answer questions spontaneously, and also to watch the children act a play. At all times enthusiastic appreciation of the performance of the scholars has been expressed.

OPEN AIR SCHOOL.

During 1936, there were admitted to the open air school 80 pupils. These may be grouped as follows according to their disability:—

Bronchitis	23
Debility and malnutrition	26
Anaemia	10
Healed or latent tuberculosis	10
Rickets	5
Chronic eye trouble	3
Chorea	1
Adenitis	1
Epilepsy	1

Of those children who left the school during the year, 60 were certified fit for discharge, four were admitted to homes or hospitals, three were sent out on account of ill-health, four children left the district, one child died, and one girl having reach the age of 16 was obliged to leave.

Of the children considered fit to leave, 17 gained from $4\frac{1}{2}$ to 10 lbs., 31 from 11 to 20 lbs., four from 21 to 30 lbs., five from 31 to 40 lbs. and three children gained over 40 lbs.

Seventeen had been at the school for the three years or more, 11 were there from two to three years, 24 from one to two years, seven from six to 12 months and one child for six months only. This represents an average gain per child of 15.8 lbs. during an average stay of 27.9 months.

The following gives a comparison of similar findings for the past five years:—

	1932	1933	1934	1935	1936
Number of children certified fit for discharge Average stay per child (in	66	59	57	42	60
months)	32.1	25.3	29.8	29.6	27.9
Average gain per child (in lbs.)	20.2	15.3	$29.8 \\ 19.0$	16.0	15.8
Estimated annual average gain					
(in lbs.)	7.55	7.23	7.66	6.55	6.79

Besides the gain in weight and the improvement in the physical condition, the pupil returning to the ordinary school is generally happier and more alert mentally. It is certainly a cause for satisfaction that in the majority of cases the good effects are lasting. Many former open air school pupils are known to be carrying out useful occupations in various spheres and are in excellent health.

The average attendance for the year was 148, the percentage average attendance being 84.5.

Infectious diseases are usually a rarity at this school; six cases, however, occurred during the year, but they were generally contracted during holidays. It is worthy of mention that during the recent influenza epidemic very few open air school children were affected.

CONVALESCENT HOME.

The convalescent home at the Cleadon Cottage Homes was utilized by rather more children than in 1935, but as a rule as the children stayed there for shorter periods the total number of inpatient days spent by the children showed a decrease on the previous year.

During 1936, 54 children of school age were admitted; the average number daily in residence was ten. The total number of in-patient days was 3,671. The average stay of those discharged during the year was 74 days, but if nine patients are excluded whose residence was less than a fortnight the average stay was 91 days.

SCHOOL CAMPS.

From 24th April to 8th October a joint camp with Gateshead elementary school children was held at Blackhall Rocks under the auspices of the National Council of Social Service and with full co-operation of both Education Authorities. Each fortnight some 300 children were accommodated there with really excellent results. In addition to four wholesome meals, a bottle of milk was provided to each child each day, and those under-nourished also received a liberal supply of Virol. Recreation included cricket, football and swimming; enjoyable excursions were arranged, and in the evenings and during inclement weather concerts and other entertainments were organised. The camp staff, and the teachers accompanying the scholars, are to be congratulated on their successful efforts to make a happy camp. 1,435 children, 797 boys and 638 girls, were sent from South Shields. All were over twelve years of age, every

senior elementary school sending a contingent. In spite of the rather unfavourable weather—only eight out of 126 camps days were regarded as "very warm and bright"—it is pleasing to report that the average gain in weight per child for a fortnight was 3.2 lbs.

HIGHER EDUCATION OF THE BLIND, ETC.

There has been no change in the methods adopted for dealing with blind and other physically defective persons recommended for higher education. The procedure and courses of training are as set out in my Annual Report for 1934.

At the end of 1936 the same number was under training as a year previously, namely 14, all of whom were blind—eight young men and six young women. Twelve were undergoing training at the South Shields Institution for the Blind and two at Benwell Grange Training Centre, Newcastle.

Two new trainees were admitted to higher education courses during the year, and two were discharged; one, a young man, after completing his training, and the other, a young woman, who left to be married and who afterwards removed from the town.

SECONDARY SCHOOLS.

Number of secondary schools—two, viz.:—High School for Girls and High School for Boys. Both are provided by the Education Authority.

Number of pupils on the registers at the end of 1936	896
Average attendance	878
Percentage average attendance	98.0

After the mid-summer vacation the new High School for boys was opened, the present Westoe Secondary School (formerly mixed) being adapted as a High School for girls only.

The formal opening ceremony of the new High School for boys was performed by the Right Revd. the Lord Bishop of Durham on September 10th, 1936.

The new school, built on modern lines, is fully equipped and possesses large playing fields and a gymnasium. Besides the headmaster's and teachers' rooms there is also a library and a special room reserved for medical inspection. The long spacious corridors and ideally situated class rooms are features of a very fine building.

The existing Secondary School—the High School for Girls—is being improved and added to by the provision of a gymnasium. The playing fields of the former High School for Boys are now available for girls.

The arrangements for routine medical examinations, following-up of defects, and treatment, were adhered to as in previous years. It is satisfactory to note that very few defects were found which required treatment and that the nutrition and general physique of the scholars was of a high standard. The nutrition of the pupils is shown in the following table:—

	Nutrition.	No. of Pupils examined.	Percentage
(a)	Excellent	365	45.8
(b)	Normal	419	52.6
(c)	Slightly subnormal	13	1.6
(d)	Bad	• •	• •
	Total	797	100.0

Twelve pupils were treated at the dental clinic and 34 had spectacles prescribed at the eye clinic. Further details concerning defects of secondary school children will be found in the tables on pages 32 to 39.

HEALTH EDUCATION.

The issue of "Better Health" was continued only for the first four months of the year; the following articles were contributed by members of the medical staff: "Keeping warm," Your posture," "Speech and its disorders," and "Keep streets clean."

Propaganda on the care of teeth and the need for treatment was carried out by the issue of special leaflets to the children and the exhibition of plaques in the clinics and schools.

MISCELLANEOUS.

JUNIOR INSTRUCTION CENTRE.

79 girls and six boys were sent by the Junior Section of the Employment Exchange to the general clinic and examined by the school medical officers, while inspections to determine the state of the nutrition of the trainees were carried out at the centres.

Examination of Scholarship or Special Place Candidates.

186 candidates were inspected, the defects observed being:—

Carious teeth	28
Defective vision	34
Chronic tonsillitis and adenoids	3
Chronic tonsillitis	4
Defective hearing	4
Corneal ulcer	1
Verminous head	1
Inguinal hernia	1

In all cases arrangements were made or advice given to remedy these defects.

Examination of Children for the Stage.

45 children who required certificates for stage performances were examined; all were granted the necessary certificates according to the requirements of the Board of Education. As some of these children were examined on more than one occasion actually 49 certificates were issued.

DEATHS OF SCHOOL CHILDREN.

The following is a statement of the causes of death during 1936, of children of school age. There were no deaths from road accidents among school children.

	Boys.		Girls.		
CAUSES OF DEATH.	5-9 years.	10-14 years.	5-9 years.	10-14 years.	Total.
Scarlet fever Diphtheria Encephalitis lethargica Cerebro-spinal fever Pulmonary tuberculosis Tuberculous meningitis Tuberculosis of intestines Tumour of brain Rheumatic fever Leukaemia Disease of eye Valvular heart disease Bronchitis Broncho-pneumonia Lobar pneumonia Diseases of teeth, etc. Tonsillitis Appendicitis Intestinal obstruction Nephritis					3 4 2 1 5 3 1 1 2 1 1 2 1 1 1 1 2 1
Carbuncle Scalds Heart failure		1 .·· 1	1		1 1 1
Total	13	9	8	9	39

ELEMENTARY AND HIGHER SCHOOLS.

TABLE 1.—MEDICAL INSPECTIONS DURING THE YEAR ENDED 31st DECEMBER, 1936.

4		
A.—ROUTINE MEDICAL INSPECTIONS.		
	Elementary.	Higher.
Number of Inspections in the prescribed Groups	s :	
Entrants	1,772	
Second Age Group (Intermediates)	1,617	797
Third Age Group (Leavers)	1.902	
		707
Total	5,291	797.
Number of other Routine Inspections	a *	
	~ ~ ~ ~	
Grand Total	$5,\!291$	797
B.—OTHER INSPECTIONS.	Market Committee	
Number of Special Inspections	5,898	2
Number of Re-Inspections	8,990	9
	7.4.000	71.77
Total	14,888	11

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

Number of individual children found at Routine Medical Inspection to require treatment (excluding Defects of Nutrition, Uncleanliness and Dental Diseases).

	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW		A STATE OF THE PARTY OF THE PARTY.
		ELEMENTARY.	
Prescribed Group.	For defective vision.	For all other conditions recorded in Table 2(A).	Total.
Entrants	19 217 237	285 126 114	298 322 331
Total	473	525	951*
Other Routine Inspections	• •		
Grand Total	473	525	951
·		HIGHER.	
	55	9	64

^{*} Some children have more than one defect.

ELEMENTARY AND HIGHER SCHOOLS.

*TABLE 2. (A.) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1936.

		Rou	tine I	Inspec	tions.	Spec	cial I	nspec	tions.
		N	o. of	Defe	ets.	No	o. of	Defe	ects.
Defect or Disease.		qui tre	le- ring eat- ent.	to be unde serv but requ	uiring e kept er ob- ation not airing cment.	quir trea	Requiring treat- ment. to be under serve but required.		iring kept ob- ation not iring ment
4-Marris - Marris - M		E1.	Hr.	El.	Hr.	El.	Hr.	El.	Hr.
*Skin	Ringworm Scalp Body Scabies Impetigo Other diseases (non-tuberculous)	1 2 5 13	• • • • • • • • • • • • • • • • • • • •	3 5 12 56	9	72 24 50 535 1095	1		• • • • • • • • • • • • • • • • • • • •
Eye.	Blepharitis Conjunctivitis Keratitis Other conditions Defective vision (excluding squint) Squint	3 473 18	 55	50 9 13 797 100	2 1 10 121	130 131 3 2 37 437 56	• • • • • • • • • • • • • • • • • • • •		
Ear.	$\begin{cases} \text{Defective hearing} & \dots \\ \text{Otitis} & \dots & \dots \\ \text{Other ear diseases} & \dots \end{cases}$			258 50 13	8 3	$\frac{12}{204}$ $\frac{14}{14}$		• •	0 0 b 0
Nose and	Chronic tonsillitis only Adenoids only	12	• •	707 58	65		• •	• •	• •
Throat.	adenoids	340	$\frac{4}{1}$	53	6	173 10		• •	• •
tube	d cervical glands (non- erculous)		• •	342 90	9 5	73 2		• •	• •

TABLE 2 (A.)—CONTINUED.

	Rou	tine I	inspec	tions.	Speci	Special Inspections.			
	No	o. of 3	Defect	s.	No	o. of	of Defects.		
Defect or Disease.		ring eat- ent.	to be unde serva but requ		Re quiri trea men	ing ıt-	to be unde serv but requ	uiring e kept er ob- ation not uiring ement.	
	El.	Hr.	El.	Hr.	El.	Hr.	E1.	Hr.	
Heart General	$\begin{array}{c} 2 \\ 1 \\ 4 \end{array}$	• •	15 27 182	$\begin{array}{c}2\\7\\34\end{array}$	3 684	· · · · · · · · · · · · · · · · · · ·		• •	
$\begin{array}{c} \textbf{Lungs.} & \left\{ \begin{array}{ll} \textbf{Bronchitis} & \dots & \dots \\ \textbf{Other non-tuberculous} \\ \textbf{diseases} & \dots & \dots \end{array} \right. \end{array}$	7	• •	147	8	802	• •	• •	· 0	
Pulmonary:— Definite Suspected Tuber- \{ Non-pulmonary:— culosis. Glands			2		$\begin{bmatrix} 1\\23\\ \dots \end{bmatrix}$	• •	• •	• •	
Bones and Joints Skin Other forms		• •	1	• •	1	• •			
$\begin{array}{l} \text{Nervous} \ \left\{ \begin{array}{l} \text{Epilepsy} \ldots \ldots \\ \text{Chorea} \ldots \ldots \\ \text{Other conditions} \end{array} \right \end{array}$			$\begin{bmatrix} 1\\1\\3 \end{bmatrix}$			• •		• •	
			43 32 24	12 5	2 17	• •			
Other defects and diseases (excluding defects of nutrition, uncleanliness and dental diseases)	2	• •	50	10	317		69		
Total	998	64	3146	319	5287	2	69		

TABLE 2.—(B.) CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

ΕĽ	EA	TE	N	TA	R	V
1.21.4	3.44		- F - A-	د خا	LLU	-E 0

	ELEMENTARY.								
Age-groups.	No. of Children inspected.	A. Exce lent	el-	B. (Norn		(Slig su nori	htly b-). ad.)
		No.	%	No.	%	No.	0/	No.	%
Entrants Second Age-group Third Age-group Other Routine Insp.	1,772 1,617 1,902	327	16.8 20.2 20.0	1,361 1,165 1,398	72.0	123	7.6	2	.17
Total	5,291	1,005	19.0	3,924	74.1	354	6.7	8	.15
		HIGHE	ER.						
	797	365	45.8	419	52.6	13	1.6		
At Public Ele At other Inst At no School	itutions				. · · ·				• •
At other Inst	itutions				. · · ·				• •
Partially Sight: At Certified	ED CHILDE	r the]	Blind	l					7
", Public Elementary Schools							44		
" no School	" no School or Institution							0 0	
Total						44 — 7 1			

,, other Institutions....., no School or Institution

Total

TABLE 3.—CONTINUED.

PARTIALLY DEAF CHILDR	EN							
At Certified Schools		Deaf		• • • • • •				
Partially Deaf								
" Public Elementary Schools								
,, other Institutions								
,, no School or Insti	itution.							
Tot	tal			• • • • • ·	4			
MENTALLY DEFECTIVE CH	HILDREN-							
At Certified Schools t		v			19			
" Public Elementar	y School	ls			78			
,, other Institutions	3	• • • • • • • •	• • • • • •	• • • • • •	2			
,, no School or Insti	tution.			• • • • • •	22			
Tot	cal				121			
EPILEPTIC CHILDREN (Sev	ere Epile	epsy)—						
At Certified Special					1			
,, Public Elementary	y School	S			2			
,, other Institutions					3			
,, no School or Insti	tution.	• • • • • • • •	• • • • • •	0 0 0 7 0 0	3			
Tot	al				6			
Physically Defective (
INFSICALLI DEFECTIVE		1N .			(
	At	At	$\mathbf{A}\mathbf{t}$	At no				
		Public			Total.			
	Special Schools.	Element'ry Schools.	Institu- tions.	or Insti- tution.				
A. Tuberculous children:								
I.—Children suffering from								
Pulmonary Tuberculosis II.—Children suffering from	2		18	39	59			

CHILDREN SUFFERING FROM MULTIPLE DEFECTS:

Non-Pulmonary Tuber-

culosis

B.—Delicate Children

C.—Crippled Children

D.—Children with Heart Disease

Blind and Feebleminded: 1 at Certified Special School.

Active Tuberculosis and Feebleminded: 1 at no School or Institution.

TABLE 4.—TREATMENT TABLES FOR THE YEAR ENDED 31st DECEMBER, 1936.

GROUP I.—TREATMENT OF MINOR AILMENTS.

(Excluding Uncleanliness).

ELEMENTARY SCHOOLS.

Disease or Defect.		defects treate ent during th	
Disease of Defect.	Under the Authority's Scheme.	Otherwise.	Total.
SKIN:— Ringworm: Scalp (i.) X-Ray treatment (ii.) Other Body Scabies Impetigo Other skin diseases MINOR EYE DEFECTS:— (External and other. but excluding cases falling in Group II.)	70 24 51 535 1,089	· · · · · · · · · · · · · · · · · · ·	70 24 51 535 1,090
MINOR EAR DEFECTS	233 394	3	233 397
TOTAL	2,696	.5	2,701

HIGHER SCHOOLS.

One pupil from a higher school received treatment for a skin disease under the Authority's Scheme.

TABLE 4.—CONTINUED.

GROUP II.—TREATMENT OF DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group I.)

	Number of Defects dealt with.							
Disease or Defect.		r the ority's eme.	Other	wise.	Total.			
	El.	Hr.	El.	Hr.	El.	Hr.		
Errors of refraction (including squint)	625	34	3		628	34		
Total	625	34	3		628	34		
No. of Children for whom spectacles were—						and the second second		
(a) Prescribed (b) Obtained		34 33	3 3	• •	593 560	34 33		

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

Number of Children—		Elem	entar	y.		Higher.		
(1) Received operative treatment:— (a) Under the Authority's scheme, in Clinic or Hospital (b) By Private Practitioner or Hospital, apart from the	(i.) 3	(ii.)		(iv.)	(i.)	(ii.)	(iii.)	(iv.)
Authority's scheme	8		34		3		2	
Total	11	•1	293		3	•	2	• •
(2) Received other forms of treatment			15				• •	
Total number treated			320			5		

Note.—(i.) Tonsils only. (ii.) Adenoids only. (iii.) Tonsils and Adenoids. (iv.) Other defects of the Nose and Throat.

GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.

Number of	f C	hildren	treated—
-----------	-----	---------	----------

4 CLEAT K	OI O		
(1)	Und	der the Authority's Scheme:	
	(a)	Residential treatment with education	4
	(b)	,, ,, without education	10
	(c)	Non-residential treatment at an Orthopaedic	
		Clinic	29*
(2)	Oth	nerwise:	
, ,	(a)	Residential treatment with education	
	(b)	" without education	2
	(c)	Non-residential treatment at an Orthopaedic	
		Clinie	7
		Total number treated—45†	

^{*}Includes one child from a Higher School.

†Some of the children are recorded in more than one of the above categories.

TABLE 5.—DENTAL INSPECTION AND TREATMENT.

ELEMENTARY SCHOOLS.

(1) Number of Children who were inspected by the Dentist:

Age.	Routine.	Specials.	Total.
Under 5	11	35	46
$5 \dots \dots$	1,473	8	1,481
6	1,616	3	1,619
7	1,539	2	1,541
8	1,523	4	1,527
9	1,399	5	1,404
10	$1,\!556$	7	1,563
11	$1,\!522$	9	1,531
$12 \dots \dots \dots \dots$	1,535	8	1.543
13	1,546	16	1,562
14	751	6	757
15	131	9	140
	***************************************	a a sala imana armada	
Total	14,602	112	14,714
	Short Space of the second state of the second		
(2) Number found to require			
treatment	8,956	112	9,068
(3) Number actually treated			
(by School Dentist)	3.831	89	3,920
(4) Attendances made by			
children for treatment	5,237	165	5,402

TABLE 5—CONTINUED.

(5) Fillings:—Permanent teeth	1,653	14	1,667
Temporary teeth	5	n 4	5
(6) Extractions—Permanent teeth	1,627	75	1,702
Temporary teeth	9,745	435	10,180
(7) Administration of general			
anaesthetics for extractions	197	28	225
(8) Other operations:—			
Permanent teeth	189	3	192
Temporary teeth	• •	• •	• •
(9) Half-days devoted to—			
Inspection, 137; Treatment,	618. Total	al, 755.	

HIGHER SCHOOLS.

12 pupils made 17 attendances at the Dental Clinic. All were treated.

The treatment comprised: 23 extractions (8 temporary teeth, 15 permanent teeth), 11 fillings (all permanent teeth) and 3 other operations.

TABLE 6.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

CONDITIONS.					
	$First \\ Survey.$				
(i.) Average number of visits per school made during the year by the School Nurses for cleanliness surveys	5	5			
(ii.) Total number of examinations of children in the schools by School Nurses:—					
(a) Children examined(b) Examinations made	$18,044 \\ 21,304$	/			
(iii.) No. of individual children found unclean	2,169	1,839			
(iv.) No. of individual children cleansed under Section 87 (2) and (3) of the Education Act, 1921		• •			
(v.) No. of cases in which legal proceedings were taken:—					
(a) Under the Education Act, 1921	• •	۰ ۵			
(b) Under the School Attendance Byelaws	• •	ø 6			





